

Attorney Docket No.: T3129(C)  
Serial No.: 10/587,732  
Filed: July 27, 2006  
Confirmation No.: 3545

**INFORMATION DISCLOSURE STATEMENT**

Sir:

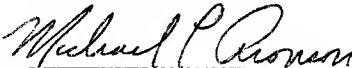
Applicants herewith submit an Information Disclosure Statement for the above-identified application.

Documents relating to the above-identified application are submitted herewith. These documents area intended for the Examiner's information and for citation with the instant case. This submission does not constitute either a representation that a thorough search has been made or an admission that the documents cited herein are properly citable against the above-identified application. An attached PTO Form 1449 lists all the documents.

No additional fee is required since this information is filed prior to the first Office Action on the merits. (37 CFR 1.97(b)(3)).

The Commissioner is hereby authorized to charge any additional fees, which may be required to our Deposit Account No. 12-1155, including all required fees under: 37 C.F.R. §1.16; 37 C.F.R. §1.17; 37 C.F.R. §1.18; 37 C.F.R. §1.136.

Respectfully submitted,



Michael P. Aronson  
Registration No. 50,372  
Agent for Applicant(s)

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INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT

## U.S. PATENT DOCUMENTS

EXAMINER INITIALS	DOCUMENT NO.	DATE	NAME OF INVENTOR	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	5 723 508	03 Mar. 98	Healy, et al.			

## FOREIGN PATENT DOCUMENTS

EXAMINER INITIALS	DOCUMENT NO.	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION YES OR NO
	99/00187	07 Jan. 99	WO			
	03/091321	06 Nov. 03	WO			
	2004/011537	05 Feb. 04	WO			
	2005/014704	17 Feb. 05	WO			

## OTHER DOCUMENTS

International Search Report, PCT/GB2005/000311, mailed 24 May 2005, 3 pp.

JP 01 011141 A (Nippi Koraagen Kogyo KK), 13 January 1969, PATENTS OF JAPAN, vol. 013, no. 182, Abstract

EXAMINER

DATE CONSIDERED

EXAMINER: INITIAL IF CITATION CONSIDERED, WHETHER OR NOT CITATION IS IN CONFORMANCE WITH MPEP 609; DRAW LINE THORUGH CITATION IF NOT IN CONFORMANCE AND NOT CONSIDERED. INCLUDE COPY OF THIS FORM WITH NEXT COMMUNICATION TO APPLICANT.